

JAN. 10. 2005 4:32PM

7635146982 MEDTRONIC

NO. 3805 P. 3

RECEIVED  
CENTRAL FAX CENTER

PATENT

JAN 10 2005

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant(s): Thomas P. Miltich	) Docket: P-11445.00
Serial No.: 10/618,467	) Group Art: 2831
Filed: July 11, 2003	) Examiner: N. Ha
Title: CAPACITORS INCLUDING METALIZED SEPARATORS	)

**REQUEST FOR ONE-MONTH EXTENSION OF TIME**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Applicant hereby requests a one-month extension of time to respond to the Office Action mailed September 9, 2004, from December 9, 2004 to January 9, 2005.

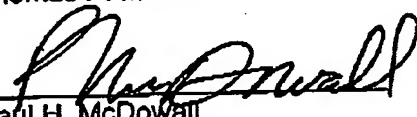
The Commissioner is hereby authorized to charge the extension fee of \$120.00, as well as any deficiencies, and credit any overpayments, to Deposit Account No. 13-2546.

Respectfully submitted,

Thomas P. Miltich

Date

10 Jan. '05

  
Paul H. McDowall  
Reg. No. 34,873  
(763) 514-3351  
Customer No. 27581

01/19/2005 DSHALLS 00000004 132546 10618467

01 FC:1251

120.00 DA

BEST AVAILABLE COPY

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875						Application or Docket Number <b>10618407</b>			
CLAIMS AS FILED - PART I									
(Column 1)		(Column 2)		SMALL ENTITY		OR OTHER THAN SMALL ENTITY			
FOR	NUMBER FILED	NUMBER EXTRA		RATE	FEE				
BASIC FEE (37 CFR 1.16(a))					\$ ____	OR	\$ ____		
TOTAL CLAIMS (37 CFR 1.16(c))				X \$ ____ =		OR	X \$ ____ =		
INDEPENDENT CLAIMS (37 CFR 1.16(b))				X \$ ____ =		OR	X \$ ____ =		
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))				+ \$ ____ =		OR	+ \$ ____ =		
				TOTAL		OR	TOTAL		
<p>* If the difference in column 1 is less than zero, enter "0" in column 2.</p>									
CLAIMS AS AMENDED - PART II									
(Column 1)		(Column 2)		(Column 3)		SMALL ENTITY		OR OTHER THAN SMALL ENTITY	
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDITIONAL FEE		
	Total (37 CFR 1.16(c))	20	Minus	27	2	X \$ ____ =		OR	X \$ ____ =
	Independent (37 CFR 1.16(b))	1	Minus	3	=	X \$ ____ =		OR	X \$ ____ =
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ \$ ____ =		OR	+ \$ ____ =
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDITIONAL FEE		
	Total (37 CFR 1.16(c))	*	Minus	**	=	X \$ ____ =		OR	X \$ ____ =
	Independent (37 CFR 1.16(b))	*	Minus	***	=	X \$ ____ =		OR	X \$ ____ =
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ \$ ____ =		OR	+ \$ ____ =
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDITIONAL FEE		
	Total (37 CFR 1.16(c))	*	Minus	**	=	X \$ ____ =		OR	X \$ ____ =
	Independent (37 CFR 1.16(b))	*	Minus	***	=	X \$ ____ =		OR	X \$ ____ =
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ \$ ____ =		OR	+ \$ ____ =
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.